2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 15, 2001 8:00 am DOCUMENT # 739542 **Secretary of State** BLUE KNIGHTS' LAW ENFORCEMENT MOTORCYCLE CLUB, F 02-15-2001 90097 043 ****70.00 Principal Place of Business Mailing Address 1845-13 AVE N 1845-13 AVE. N. PO BOX 12274 P.O. BOX 12274 C0022058 ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 59-2361229 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required-6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) SHERMAN, FRED J. 6050 FOCH STREET N.E. ST. PETERSBURG FL 33703 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE ☐ Delete TITI F ☐ Change SHERMAN, FRED J. NAME NAME STREET ADDRESS 6050 FOCH ST N E STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33703 CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE TITLE VANDEYMARK, EDWARD NAME NAME STREET ADDRESS STREET ADDRESS 4122-36 AVE N CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete ☐ Change Addition TITI F TITI F NAME SIEGEL, JOHN B. NAME STREET ADDRESS 3790 - 44 AVENUE N STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL D TITLE ☐ Defete TITLE ☐ Change Addition CHANDLER, NORM NAME STREET ADDRESS 94 PELICAN DR. N. STREET ADDRESS CITY-ST-ZIP OLDSMAR FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CORBET, STEVE NAME NAME STREET ADDRESS 4310 56 ST NO STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KENNETH CITY FL TITLE ☐ Delete TITLE Addition VANDEYMARK, EDWARD NAME NAME STREET ADDRESS 4122 36 AVE N STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33713

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND YERS OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR